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No. 5816

AUG 14 2006

PTO/SB/22 (12-04)
Approved for use through 07/31/2008, OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optio	Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			2	25174A	
Application Number 10/062, 062			Filed January	31, 2002	
For PRO	ocess for manufacturing a co	MPOSITE SHEET			
Art Unit	Art Unit 1732			covici	
This is a recapplication.	equest under the provisions of 37 CFR 1.13	36(a) to extend the per	riod for filing a reply in the	ne above identified	
The request	sted extension and fee are as follows (chec	ck time period desired	and enter the appropris	ite fee below):	
		<u>Fee</u>	Small Entity Fee		
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
x	Two months (37 CFR 1.17(a)(2))	\$450	\$22 5	\$ <u>450.00</u>	
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
	Four months (37 CFR 1.17(a)(4))	\$1590	\$7 95	\$	
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.					
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to					
Deposi	it Account Number50-058	68 I have	e enclosed a duplicate	te copy of this sheet.	
WARNIN Provide	NG: Information on this form may become pu credit card information and authorization or	ublic. Credit card inform n PTO-2038.	nation should not be inch	uded on this form.	
I am the	applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/98).					
	attorney or agent of record. Registration Number38,969				
	attorney or agent under 37 CFI Registration number if acting under				
 	Margar Mullium Signature		Augus	it 14, 2006	
	() Signature		0 -	Jate	
	Margaret S. Millikin Typed or printed name		740/321	1-5359 one Number	
·MTE- Cinnature			•		
signature is requi	es of all the inventors or assignees of record of the enti- rired, see below.	ifé interest or vieir represenu	ative(s) are required. Submit n	nultiple forms if more than one	
X Total of	f 1 forms are	e submitted.			

This collection of information is required by 37 CFR 1.136(e). The information is required to obtain or retein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.